COMBINED DECLARATION & POWER OF ATTORNEY - U.S.A Application

As a below named inventor, I hereby declare that:

[X]

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled CYCLOPENTANE(ENE) HEPTENOIC OR HEPTANOIC ACIDS AND DERIVATIVES THEREOF USEFUL AS THERAPEUTIC AGENTS the specification of which

	(check one)	[X]	is attached	hereto					
		[]	was filed on	a	s US Appl	ication S	erial No.		_
			or PCT Inte						
			and was am						
specifi	I hereby sta cation, includi		have review aims, as amen						e-identified
priorit invent countr applic	I acknowledg ation in accord- by benefits und for's certificate, by other than ation for patent that of the Price	ance with ler 35 U , or §3650 the Unit t or inve	SC § 119(a)-((a) of any PC' ted States, li ntor's certific	le of Federa d) or §365 I Internati sted below ate, or PCI	al Regulat (b) of any onal appli and have	ions, §1.5 foreign cation wh e also id	56(a). I he application hich design lentified	ereby cl on(s) fo gnated a below	laim foreign or patent or at least one any foreign
							[]		
	Number		Country	Day/Mor	th/Yr filed)	P	riority Not C	Claimed	
applica	I hereby cla ation(s) listed b		benefit unde	r 35 USC	§119 (e)	of any	United	States	provisional
	Application No.		Filing Date						

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Filing Date
09/225,034	1/4/1999
09/084,805	5/26/1998
08/861,414	5/21/1997
08/740,883	11/4/1996
08/445,842	7/11/1995
08 / 174 535	12/28/1993

I hereby appoint ROBERT J. BARAN, Registration No. 25,806 (to whom all communications are to be directed), at Allergan, Inc. (T2-7H), 2525 Dupont Drive, Irvine, CA. 92612, telephone number (714) 246-4669, facsimile number (714) 246-4249, and the belownamed persons (of the same address) individually and collectively my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent, with full power to appoint associate attorneys:

ion No.	<u>Name</u>	
	arlos A. Fisher	
	Iartin A. Voet	
	tephen Donovan	
_	tephen Donovan	

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

First Name:	Initial	Last Name Burk			
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